

N. B.—In case of more than one child at a birth, a SEPARATE RETURN must be made for each, and the number of each, in order of birth, stated.

PLACE OF BIRTH		ARIZONA STATE BOARD OF HEALTH	
1. County of <u>Gila</u>	BUREAU OF VITAL STATISTICS		
District of _____	ORIGINAL CERTIFICATE OF BIRTH		
Town of <u>Hayden</u>	State Index No. <u>155</u>		
or _____	Co. Registrar No. <u>253</u>		
City of _____	Local Registrar No. <u>12</u>		
No. _____ (If birth occurred in a hospital or institution, give its NAME instead of street and number)			
2. Full name of child <u>Maria Rosales</u>			
3. Sex of child <u>Female</u>	To be answered ONLY in event of plural births.	4. Twin, triplet or other.	6. Legitimate? <u>yes</u>
5. No., in order of birth.		7. Date of birth <u>April 18 1923</u> (Month, day, year)	
8. Full name <u>Luis Rosales</u>	FATHER		
14. Full maiden name <u>Helena Montenegro</u>	MOTHER		
9. Residence (Usual place of abode) <u>Hayden, Ariz</u>	15. Residence (Usual place of abode) <u>Hayden Ariz</u>		
10. Color or <u>Mexican</u>	16. Color or <u>Mexican</u>		
11. Age at last birthday <u>37</u> (Years)	17. Age at last birthday <u>24</u> (Years)		
12. Birthplace (city or place) (State or country) <u>Mexico</u>	18. Birthplace (city or place) (State or country) <u>Arizona</u>		
13. Occupation <u>Electrician</u>	19. Occupation <u>Housewife</u>		
20. Number of children of this mother (Taken as of time of birth of child here-in certified and including this child.)			
(a) Born alive and now living <u>6</u> (b) Born alive but now dead <u>1</u> (c) Stillborn <u>0</u>			
CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.			
I hereby certify that I attended the birth of this child, who was <u>born alive</u> at <u>5:45</u> a.m. on the date above stated.			
*When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.			
Signature <u>Harry C. Ladewig, M.D.</u>		(Physician or midwife)	
Address <u>Hayden, Arizona</u>			
Given name added from a supplemental report _____ (Month, day, year)		Filed <u>Apr 23</u> , 1923 <u>John D. Dast</u>	
Registrar. _____		Filed <u>May 8</u> , 1928 <u>B. G. Dast</u>	
492-448-846		County Registrar.	